

From: [Olemara Peters](#)
To: [DOH EPH RP Info](#)
Subject: Public comment-wi-fi in schools
Date: Thursday, February 27, 2014 11:32:37 AM

Dear Sirs,

Washington's families entrust children's safety, in the schools system, to the DOH and the Office of the Superintendent of Public Instruction. The draft report "Responding to Wi-Fi Safety Concerns in Our Schools" joins in the wireless industry's denial about RF emissions' harm -- mis-selecting / mis-quoting studies, to uphold that denial -- a violation of that trust.

Current wireless-emissions "safety standards" (written by industry and its revolving-door "regulatory agencies") ignore (by similar mis-selecting / mis-quoting of studies)

- 1) all RF-emitting technology developed later than 1986, and
- 2) all health ill-effects (neurological, biochemical, immune, carcinogenic, cognitive, ADD/ADHD, sleep-disturbances, headaches, nosebleeds, and many more) except physical heating within a 6-minute exposure of an adult male 6' tall.

There are many people, besides adult males 6' tall, who spend more than 6 minutes at school.

Please revise the report, to more clearly address the realities of health and safety (not just wireless-industry's pocketbook) -- including, to encourage more schools to emulate those that have committed to protect health and safety by landlining their technology systems.

Sincerely,

Olemara Peters
Redmond, WA

<Personal Information - Privacy - RCW 42.56...>

Sent from a landlined computer

From: [Olemara Peters](#)
To: [DOH EPH RP Info](#)
Subject: Public comment-wi-fi in schools
Date: Monday, March 03, 2014 1:04:29 AM
Attachments: [image001.png](#)

Dear Sirs,

I support and agree-with every point of Karen Nold's detailed assessment of your draft report. I urge you, in the interests of integrity, to correct the report, congruent with each of her points documented at http://meansforchange.org/Portals/0/FILES/2014/02/Wi-Fi_Safety_Draft_Report_Comments_Addendum.pdf and further in her Feb 3 email (2nd item pasted below).

Sincerely,
Olemara Peters
Redmond, WA

< Personal Information - Privacy - ... >

From: Olemara Peters < Personal Information - Privacy - R... >
Date: February 27, 2014 11:32:13 AM PST
To: RadiationInfo@doh.wa.gov
Subject: Public comment-wi-fi in schools

Dear Sirs,

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Olemara Peters
Redmond, WA

< Personal Information - Privacy - R... >

Sent from a landlined computer

From: Means For Change < Personal Information - Privacy - RCW ... >
Subject: Public comment-wi-fi in schools
Date: February 3, 2014 7:52:26 PM PST
To: Means For Change < Personal Information - Privacy - RCW ... >

COMMENTS ON "Responding to Wi-Fi Safety Concerns in Our Schools, January 2014 Working Draft"

February 3, 2014

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[Washington State Department of Health & Office of Superintendent of Public Instruction](#)
[EMAIL: RadiationInfo@doh.wa.gov](mailto:RadiationInfo@doh.wa.gov)

Thank you for your combined efforts and acknowledging you are “prepared to act quickly” if the health and safety of children are found to be compromised. The draft report has several ‘loopholes’ which discredit the state’s assertion that wireless is safe. The state claims documents were reviewed from 9 national and 6 international health agencies, however close scrutiny reveals qualified documents from only 6 national and 2 international health agencies, due to the disqualification of 7 documents by reason of no supporting data, industry conflict, or simply a lack of meeting the state’s own definition of a health agency – “an organization sponsored by a national government or an intergovernmental body such as the WHO or the European Union, and tasked, at least in part, with protecting the health of the public.”

The state says document 1 measured the exposure to RF in school, and concluded that levels were far below the ICNIRP threshold. The state refers us to the Health Council of the Netherlands report; however it was Health England [document 4] that performed the study. Furthermore, the state concludes “if there is no evidence of risk associated with cell phone use, then there is also no evidence of risk from other RF devices.” Conversely, if there is evidence of risk associated with cell phone use, then there is also evidence of risk from other RF devices. An analysis of each report from Appendix A exhibits this evidence of risk and raises concern about the validity, and intentions, of the state’s draft report.

Document 1 – 2013 Netherlands. The state cites ‘no clear and consistent evidence’ for an increased risk of tumors in the head with up to ~ 13 years of mobile telephone use; however omits “a slightly increased risk can also not be excluded”.

Document 2 – 2013 Sweden. The state cites ‘no good evidence’, however omits there is evidence: (p46) RF EMF seems to be able to induce oxidative stress in brain (p47) and other tissues; which (p9) may be induced at levels around the current exposure limits and may enhance risk of health effects; (p9) Repeatedly, human randomized double blind studies show association between acute mobile phone exposure and EEG; (p10) adverse effects have been observed in child development, reproductive health, MS, cognitive decline in elderly, auditory functions, bone mineralization and hypertension studies; (p10) study of young adults reported sleep disturbances and depression; (p44) repeated mobile phone exposures may change protein expression, calcium homeostasis, cerebral blood flow; (p50) the author previously concluded that RF EMF by itself has no carcinogenic effect, but some new studies indicate increased DNA damage; (p59) exposures of at least 30 min have shown local decrement of glucose metabolism or hemoglobin concentration.

Document 4 – 2012 England. The state cites ‘no convincing evidence’, however omits there is evidence: (p87) exposure could enhance the effect of other genotoxins, such as X-rays or chemical carcinogens; (p87) RF might act synergistically in combination with known mutagens or promoting agents; (p93) ~equal results – some show apoptosis, some don’t; (p103) the majority of studies find effects on cell membranes after mobile phone exposures; (p105) most studies of changes in protein function/structure have found effects; (p219) increased glucose metabolism suggest effect of mobile phones on brain metabolism; (p226) EEG studies - most consistent body of evidence for effect on brain function.

Document 5 – 2012 EU. The state cites ‘inadequate evidence’, however omits: (p17) some studies report effects on sleep and sleep EEG patterns; and (p48) long-term mobile phone use may induce migraine and vertigo.

Document 6 – 2012 Norway. **Must be disqualified** from the final report since it is a *summary* of the 2012 Norwegian Institute of Public Health report, and is devoid of any citations, references, or bibliography and can’t be verified.

- Document 7 – 2011 Netherlands. The state cites ‘no increased risk’, however omits there is a risk: (p11) studies are limited for brain development/health in children, and focus on children over 10, so such effects cannot be ruled out; (p24) one study on supporting cells from brain tissue found an effect on an enzyme important to cell growth and differentiation at exposure slightly below the SAR limit; (p25) changes found in several cell types in animal brain tissue; (p26) study of 13-15 year olds testing memory tasks found signs for decreased precision; (p27) observed in young rats - effects on growth hormone levels, increased DNA damage, increases and decreases in various brain enzyme activities; (p27) decrease in skin electrical conductivity (male teens) after mobile phone exposure; (p28) after 24 hour exposure, in the most exposed group, youths aged 8-12 and 13-17 reported increase in behavioral problems; (p33) may affect brain development – may lead to negative effects; (p34) it is practically impossible to conduct long-term studies in children since they undergo many major physical changes in a short time. Casting further doubt about the findings in the draft report, on page 35, the author says ICNIRP standards around 2 GHz are not correct (Wi-Fi is 2.4 GHz):

...around 2 GHz, the reference levels proposed by ICNIRP are not correct. For young children and small individuals the reference levels were found to correspond to an SAR value higher than the maximum allowable value. It was assumed that the reference levels were determined for the worst-case situations, but appears not to be the case. Therefore, the reference levels must be corrected downwards.

Document 8 – 2011 Spain. **Must be disqualified** from the final report since the author is funded by the Fundación General of the Complutense University of Madrid and does not meet the state’s review criteria.

Document 9 – 2010 EU. **Must be disqualified** from the final report since it “is not to be perceived as the opinion of the European Commission.” The state cites ‘no observable effects’, however omits (p7) health effects have been observed.

- Document 10 – 2010 EU. **Must be disqualified** from the final report since it has documented bias. One author, Professor Anders Ahlbom, was found to be the cofounder of Gunnar Ahlbom AB, a Brussels-based lobby firm aiming to assist the telecom industry on EU regulations, public affairs and corporate communications. ^[1]

- Document 11 – 2009 ICNIRP. **Must be disqualified** from the final report since ICNIRP sets safety limit standards used by the International Telecommunication Union and other wireless industry organizations, and therefore has potential for influence by the wireless industry. The state must seek impartial, non-industry influenced data.

Document 12 – 2007 Ireland. **Must be disqualified** from the final report since the author “has responsibility for the Telecommunications, Broadcasting and Energy sectors”, not protecting the health of the public.

Document 13 – 2005 France. The state chose this report citing ‘no definitive conclusions’, although they were asked to acknowledge, from the same agency, the 2013 “**Update of the ‘Radiofrequencies and health’ expert appraisal**” ^[2] recommending limiting exposure to RF, especially for the most vulnerable populations. In an OSPI Freedom of Information Act request, the state admitted receipt, and that it “probably meets our criteria”, however it was omitted. It is the state’s duty to consider this qualified health agency’s recommendation and it must be included in the final report.

Document 14 – 2003 USA. **Must be disqualified** from the final report since the author’s Collaborating Organizations, having the opportunity to comment on draft reports, include the FCC and the IEEE – both influenced by the wireless industry; and Corporate Sponsors, providing valuable fiscal support, include 3M, a manufacturer of wireless products.

Document 15 – 2002 Australia. The state cites ‘no adverse health effects’, however omits a pertinent recommendation from the Forward - the Standard, nevertheless, states the principle of minimizing RF exposure which is unnecessary.

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Document 16 – 2000 New Zealand. The state cites ‘no adverse effects’, however omits (p2) our understanding of how RF interacts with the body is incomplete; low- or no-cost measures should be applied to avoid or reduce exposures.

The state purports they ‘reviewed every comprehensive scientific review’ however omitted qualified, pertinent data they were presented, including:

1. 2013 **Radiofrequency Toolkit for Environmental Health Practitioners**, [3] finding “decreased sperm motility associated with increased use of mobile phones”, and recommends caution – “keeping mobile phones away from [male] genital area and limiting mobile phone use.”
2. 2009 **Reducing Environmental Cancer Risk, What We Can Do Now**[4] finding (pA-47) EMR/EMF may also have deleterious effects on human health with prolonged exposure; (vii) eliminating/minimizing exposures must be acted upon to protect especially children, at special risk due to smaller body mass and rapid physical development, both magnifying their vulnerability to known or suspected carcinogens, including radiation; (xi) a precautionary approach should replace current reactionary ones; (p59) reduce exposure to RF with fewer, shorter calls, texting, using cell phones only when landline unavailable, keep phone away from head, keep active phone off belt and out of pocket.

Also worth mentioning – in a document obtained from an OSPI Freedom of Information Act request, the state is seen in an earlier draft attempting to downplay the risks of wireless. It correctly cites the Health England document and ICNIRP, (incorrectly referenced in draft - see par. 2 above), then makes a note underlined below, to downplay the dangers:

“One report (Health England) actually measured the exposure to RF in school settings, and concluded that as long as manufacturer’s recommendations were being followed, the safety thresholds used in the ICNIRP were not exceeded. [*re-word so does not imply danger if recommendations are not followed*]”. Emphasis added.

The earlier draft, implied biological effects of wireless radiation, but this sentence was omitted from the final draft:

“ICNIRP standards focus on thermal effects as only likely danger...”

In fact thermal effects are not the only likely danger. The state concludes there is little uncertainty regarding non-thermal health effects; and Wi-Fi is unlikely to pose a health risk. This is not equivalent to the standards of safety we expect for our children in your care. We expect zero tolerance in our schools for guns, drugs, alcohol, bullying, and possible carcinogens like lead and DDT... and wireless radiation.

Numerous experts disagree with the state’s conclusions, such as the American Academy of Environmental Medicine [5], American Academy of Pediatrics [6], International Doctors’ Appeal [7], etc. As long ago as 1988, the U.S Air Force produced “**Radiofrequency/Microwave Radiation Biological Effects and Safety Standards: A Review**” [8] and concluded: “RF/MW radiation is known to have a biological effect on living organisms” and research over the past 30 years has shown that low intensity radiation can profoundly affect biological processes.

The state should not require conclusive, causal evidence of a potential health risk to children, just the evidence of risk documented above and elsewhere. The question is – when is the evidence sufficient to take action? Studies of the harmful effects of wireless radiation were silenced by the DOH/OSPI narrow review criteria, and qualified data with evidence of harm was excluded from the draft report. The school stands “in loco parentis” for our children and as such has a responsibility to provide a safe learning environment. There is no conclusive evidence that wireless is safe and the state has an obligation to immediately remove Wi-Fi and cordless phones until proven safe.

Respectfully,

Karen Nold, Means For Change

- [1] <http://www.monanilsson.se/document/AhlbomConflictsIARCMay23.pdf>
- 2 http://www.anses.fr/sites/default/files/documents/PRES2013CPA18EN_0.pdf
- 3 http://www.bccdc.ca/NR/rdonlyres/9AE4404B-67FF-411E-81B1-4DB75846BF2F/0/RadiofrequencyToolkit_v4_06132013.pdf
- 4 http://deainfo.nci.nih.gov/advisory/pcp/annualReports/pcp08-09rpt/PCP_Report_08-09_508.pdf
- 5 <http://aaemonline.org/images/WiFiUSA.pdf>
- 6 <http://apps.fcc.gov/ecfs/document/view?id=7520941318>
- 7 http://freiburger-appell-2012.info/media/International_Doctors_Appeal_2012_Nov.pdf
- 8 <http://www.stopthecrime.net/docs/RF-Microwave-Radiation-Biological-Effects%20Rome%20Labs.pdf>

- [1] <http://www.monanilsson.se/document/AhlbomConflictsIARCMay23.pdf>
- [2] http://www.anses.fr/sites/default/files/documents/PRES2013CPA18EN_0.pdf
- [3] http://www.bccdc.ca/NR/rdonlyres/9AE4404B-67FF-411E-81B1-4DB75846BF2F/0/RadiofrequencyToolkit_v4_06132013.pdf
- [4] http://deainfo.nci.nih.gov/advisory/pcp/annualReports/pcp08-09rpt/PCP_Report_08-09_508.pdf
- [5] <http://aaemonline.org/images/WiFiUSA.pdf>
- [6] <http://apps.fcc.gov/ecfs/document/view?id=7520941318>
- [7] http://freiburger-appell-2012.info/media/International_Doctors_Appeal_2012_Nov.pdf
- [8] <http://www.stopthecrime.net/docs/RF-Microwave-Radiation-Biological-Effects%20Rome%20Labs.pdf>